



Bib Data Sheet


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SERIAL NUMBER 09/531,821	FILING DATE 03/21/2000 RULE -	CLASS 702	GROUP ART UNIT 2857	ATTORNEY DOCKET NO. MERCURY.054A	
APPLICANTS Eli Levy, Herzelia, ISRAEL; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/01/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>[Signature]</i> Initials <i>QW</i>		STATE OR COUNTRY ISRAEL	SHEETS DRAWING 4	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 4
ADDRESS 20995					
TITLE Server monitoring virtual points of presence					
FILING FEE RECEIVED 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees		
			<input type="checkbox"/> 1.16 Fees (Filing)		
			<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
			<input type="checkbox"/> 1.18 Fees (Issue)		
			<input type="checkbox"/> Other _____		
			<input type="checkbox"/> Credit		



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CONFIRMATION NO. 7283

SERIAL NUMBER 09/531,821	FILING DATE 03/21/2000 RULE	CLASS 709	GROUP ART UNIT 2141	ATTORNEY DOCKET NO. MERCURY.054A
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APPLICANTS
Eli Levy, Herzelia, ISRAEL;

** CONTINUING DATA ***** QW

** FOREIGN APPLICATIONS ***** QW

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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>	

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TITLE
Server monitoring virtual points of presence

FILING FEE RECEIVED 9/6	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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